

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760975

FILED  
May 02, 2010  
Secretary of State

**Entity Name:** THE SAINT JOHN'S MISSIONARY BAPTIST CHURCH, OF ALTAMONTE SPRINGS, FLORIDA,  
INCORPORATED

**Current Principal Place of Business:**

2401 SO. C.R. 427  
ALTAMONTE SPRGS, FL 32701 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 162162  
ALTAMONTE SPRINGS, FL 32716 US

**New Mailing Address:**

**FEI Number:** 59-2888138 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

STANDIFER, LESTER SR  
4064 CASTLEGATE DR  
ORLANDO, FL 32839 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: .T  
Name: .JERRY, PATRICIA A  
Address: 511 HARBOR POINT BLVD.  
City-St-Zip: ORLANDO, FL 32835

Title: D  
Name: STANDIFER, LESTER SR.  
Address: 4064 CASTLEGATE DRIVE  
City-St-Zip: ORLANDO, FL 32839

Title: T  
Name: .ROBINSON, .SHIRLEY  
Address: .234 TONI STREET  
City-St-Zip: .ORLANDO, FL .3281

Title: P  
Name: ROBINSON, TONY  
Address: 515 MOCKINGBIRD LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: FS  
Name: JONES, EMMA  
Address: 2619 KERWOOD CIR  
City-St-Zip: ORLANDO, FL 32810

Title: T  
Name: WALKER, JENNIFER  
Address: 553 SPANISH TRACE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LESTER STANDIFER SR.

DIR.

05/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date